Case:17-03283-LTS Doc#:17268-1 Filed:07/08/21 Entered:07/08/21 16:46:44 -Proof of Claim: <CLAIM NUMBER> Claimant: <CLAIMANT NAME> Maria E Sepulueda INFORMATION REQUESTED TO PROCESS YOUR CLAIM Please answer all four (4) questions and any applicable sub-qiestions. Please include as much detail as possible in your responses. Your answers should provide more information than the initial proof of claim. For example, if you previously wrote as the basis for your claim "Ley 96," please elaborate as to the specific laws on which you are purporting to rely, the year the law at issue was enacted, and how and why you believe such particular law provides a basis for your claim. Additionally, if available and applicable to your claim, please provide: Copy of a pleading, such as a Complaint or an Answer; Any unpaid judgment or settlement agreement; Written notice of intent to file a claim with proof of malling; Any and all documentation you believe supports your claim. send the completed form and any supporting documents via email to PRClaimsInfo@primeclerk.com, or by mail or hand delivery to the following address: Commonwealth of Puerto Rico Supplemental Information Processing Center c/o Prime Clerk, LLC 850 Third Avenue, Suite 412 Brooklyn, NY 11232 Questionnaire What is the basis of your claim? A pending or closed legal action with or against the Puerto Rican government Current or former employment with the Government of Puerto Rico □ Other (Provide as much detail as possible below. Attach additional pages if needed.) Dinero a den de do por conecepto de aquentos - Ley Promeso 2. What is the amount of your claim (how much money do you claim to be owed): 26,400:00 3. Employment. Does your claim relate to current or former employment with the Government of Puerto Rico? No. Please continue to Question 4. Yes. Answer Questions 3(a)-(d). 3(a). Identify the specific agency or department where you were or are employed:

Desde el 2 de narzo de 1975 haute iz de enero de 1998

3(b). Identify the dates of your employment related to your claim:

3(c). Last four digits of your social security number: 50 2

3(d). V	Vhat is the nature of your employment claims (select all ap	plicable):
		• • • • • • • • • • • • • • • • • • • •
,D	≼ Unpaid Wages _ i	·
t	Sick Days :	
	Union Grievance	•
; , <u>.</u> [	Vacation	:
_	( Ou Through as much detail as possible. Attach add	litional pages if necessary).
	Lay 89 - Julio - 1979 - Retribución	suniforme y Ley 89
	Jul, 3 -1995 - El Romera 20	-0
	gal Action. Does your claim relate to a pending or clos	ed legal action?
4. <u>L.e</u>	• • • • • • • • • • • • • • • • • • •	
M	No.	
	Yes. Answer Questions 4(a)-(f).	
4(a). ]	dentify the department or agency that is a party to the acti	on.
	N) A	
- 4(b)،	Identify the name and address of the court or agency wher	e the action is pending:
4(a)	Care number: W/A	· 
•	Case number:	
	Title, Caption, or Name of Case:	11/1:A
4(e).	Status of the case (pending, on appeal, or concluded):	1 N-/31
	Do you have an unpaid judgment? Yes / No (Circle one)	NIA
•	If yes, what is the date and amount of the judgment?	( NV ['9"]
· ··. ·		

RECLAMANTE: Maria E Sepulveda Torres	
NUMERO DE PROCEDIMIENTO 17 BK 3283 - LTS	e
NUMERO DE RECLAMACION: 176231  NUMERO DE telefono: 787-842-3728  Numero De emplenda: 8378  Reclamación de dinero adeudado de leyes aprobadas que me competen por m	nis años de
servicio desde el 2 de <u>Marzo</u> de <u>1975</u> hasta el 2 de <u>6</u>	evero de
1998 como Representante de Servicio III	
de la Puerto Rico Telephone Company - ELA.	
-1. Ley 89 - julio 1995 ROMERAZO GANTIDAD \$	_
Así como otras leyes que me apliquen y no se me otorgo la compensación corresp	ondiente.
Le agradezco la atención sobre este asunto.	
Atentamente, !	
Maria E. Sepulveda Torres  Nombre en letra de molde	
Marie & Sypelvet Town 6/29 2024 Firma y fecha	Cantidad Adendade
D Ley 89-Julio 1979-Retribución Uniforme E Ley 89-Julio 1995-El Romera zo Gran Total	\$ 22,800.00 \$ 13,600.00 \$ 26,400.00

RECLAMANTE Maria E Segulveda Torres	
RECLAMANTE MAVIA E. SEGMITORIA TVIIS	
DIRECCIÓN Calle Calle to 3131	
Wince, Guerto Rice	
Numero Reclamación 17423)	
Fecha de presentación (envío) 29 de junio de 2021!	
Deudor Commonwealth of Puerto Rico	
Lateral 26 do Turnio	d
Por este medio incluyo con mi reclamación presentada el 29 de Junio lo siguiente:	
1. Evidencia de trabajo de Puerto Rico Telephone Company en Ponce, Puerto Rico — como Kepresentante de Servicio III.	· ELA
desde el <u>Z</u> de <u>Marzo</u> . de <u>I 998</u> . (ver evidencia adjunta)	
2. El monto adeudado en mi reclamación es de \$ 26,400.00	
- Muchas gracias por la pronta atención a mi petición.	1
Cordlalmente,	1
4 lines	
Maria E Sepulveda Torres Nombre en letra de molde	8
Mari E. Sepulade tara -6/29 -2021	
Firma y fecha	

PRT/CLARO P.O. Box 360998 San Juan PR 00936-0998

## CERTIFICACION

## MARIA E. SEPULVEDA XXX-XX- 5025

Para (el)(la) ex emplead(o)(a) de referencia certificamos lo siguiente:

- Ingresó a PRT/Claro efectivo el 02/03/1975.
- Trabajó como emplead(o)(a) regular hasta 02/01/1998.

Esta certificación confirma que la información fue obtenida de nuestro sistema de información personal. En Guaynabo, Puerto Rico a lunes, 14 de junio de 2021.

Abigail Alejandro González

Abigail Alejandro González

Abigaíl Alejandro Gonzalez Oficial de Compensación Compensación y Récords